PATENT Attorney Docket No.: 082368-007600US Client Reference No.: ONC-A0305P-US

TOWNSEND and TOWNSEND and CREW LLP

By: //Aaron Hokamura/

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Confirmation No · 5301

NAKAMURA and FURUKAWA

Examiner:

Application No.: 10/572,932 Filed: September 14, 2004 Art Unit:

For: METHOD FOR DIAGNOSING HEPATOCELLULAR CARCINOMAS INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR §1.97 and

§1.98

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of references AA - AD are enclosed. A copy of reference AE is not provided since it was cited in an International Search Report in a corresponding application, and, as such, should have been provided directly by the WIPO under the exchange program between the USPTO, the EPO and the JPO. A copy of the Search Report is attached.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR §1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no NAKAMURA and FURUKAWA Application No.: 10/572,932 Page 2

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.

However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

/Kevin Bastian/

Kevin Bastian Reg. No. 34,774

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| Substitute for form 1449ABBPTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT | | | | | | | | Complete if Known | | | | | | | | | | |
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EXAMINER: Initial if reference considered, whether or not obtation is in conformance with MPEP 609. Draw line through obtation if not in conformance and not considered include copy of this form with next communication to applicant.

Applicant's unique cotton designation number (options). Applicant's unique cotton designation number (options)**.